No. 10
amenorrhoea

An Inaugural Dissertation for the Degree of Doctor of Medicine

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by Chs. Sturdivant - admitted March 8th 1821

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Amenorrhœa

This term is derived from the Greek, and signifies an interruption of the menstrual discharge; it is by practical writers divided into retention or amanosis mensium of Latin authors, and suppression of the menses; this last division is sometimes subdivided into checked & prevented menstruation By the former we understand, that the discharge from some cause is retarded beyond the period, when it should make its first appearance; by the latter, that the discharge may have taken place, but has been suppressed or prevented from returning at the usual subsequent periods; from some other cause besides that of pregnancy or lactation. It might here be expected that I should consider for a moment the nature of this discharge, and the purpose which it fulfils in the animal economy; but this is a task which I most willingly resign, both from the want of talents and inclination, to those who delight in theory, and are fond of exploring the fields of uncertainty. It has long been a problem, why nature has subjected females to this discharge, and a problem, which I do not believe has ever been altogether satisfactorily explained; as numerous as the theories are

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which have been offered on the subject. Mr. Abernethy has ventured to give us a solution of it; his hypothesis although ingenious, has not led us entirely out of the dark on this question. He supposes, that "it relieves the irritation of the uterus, and mitigates the extreme of sexual desire, thus enabling a woman to conform to the laws of morality, and the social compacts that are established between us". Leaving Mr. Abernethy's theory to rest on its own foundation, I shall only add that I believe this discharge to be necessary, by the ordination of nature to promote health, and in some way, to contribute to conception. We reject the hypothesis of this discharge being an hemorrhage from the uterus, produced by a mechanical dilatation of the extremities of the uterine vessels, and confess it to be a peculiar, and genuine secretion; the uterus taking on the office of a gland. ~ –

With these introductory remarks, I shall in as simple and concise manner as possible, give a history of the cause, symptoms, and treatment of the different forms of amenorrhœa. I proceed first to speak of retention of the menses. All females do not menstruate at the same period of life, in consequence of a difference of

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constitution, some arriving at the age of puberty, much sooner than others: a different temperature of climate, likewise has considerable influence, in regulating the period of the first appearance of this discharge; those inhabiting warm climates being subject to it at a much earlier period of life, than those living under colder latitudes. In this country from the fourteenth to the sixteenth year, is the time when most females begin to menstruate, but as there are often deviations from this rule without any injury to the health of the female, so we cannot call every case of retention a disease because a female does not menstruate at a period which is common for most females, unless the retention be accompanied with such chlorotic symptoms, and disorder in other parts of the system as can be justly attributed to that cause. The retention of the menses seems to be owing to a want of power in the uterus, or to such deficiency of action, as prevents it from performing its healthy secretory functions; but what it is that produces this weakness and want of action at this time of life in females, appears to be a question involved in some obscurity. It is certain that there is a connection between the state of the ovaries and the process of menstruation, a defective or

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morbid condition of the former being always followed by morbid symptoms in the latter; but whether this connection be mere coincidences and concomitant circumstances, or whether they are to be considered as cause and effect, I cannot positively decide. The stomach, and its assistant Chylopoietic viscera seem to exercise great agency over the uterus, since impaired digestion, anorexia, costiveness, and many symptoms of Dyspepsia usually accompany or precede this disease.—

Symptoms, besides those just mentioned in the last paragraph are the following; Languor, listlessness, to exercise of any kind, debility, and a preternatural appetite for chalk lime, and other absorbents. Sometimes head ache, with pain in the back, loins and hips, and acidities in the stomach. The patient is fatigued and troubled with palpitations of the heart, on the slightest exercise The pulse is quick and small, and the unhappy female often has a cough added to the catalogue of her sufferings. As the disease progresses the rose of health, the bloom of the cheek abandon their empire, and the lily's hue succeeds, the lips loose their vermillion tint, the eyes are encircled with a livid areola, and the ambrosial fragrance of the breath is exchanged for the most offen-

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sive fetor. The countenance presents sometimes a pale, greenish complexion, and hence the name of green sickness or chlorosis of authors. Adematous swellings, a leucophlegmatic habit, and a general flaccidity of the whole system, attend as consequences of this complaint, and hectic fever sometimes supervenes. I here conclude the history of its symptoms.--

Treatment. There are two indications in the cure of this disease; the first is to restore the general health, and tone of the system; the second to rouse the vessels of the uterus to the due performance of their healthy secretory functions. The first indication may be fulfilled by all those means which impart health, and vigour to the system, by tonics, Calybeates, exercise, and a proper attention to diet. I have before observed that costiveness, and much gastric derangement often accompanied this disease; for this reason I deem it of service to precede the exhibition of other remedies, by a gentle emetic, it will prepare the stomach for their exhibition and give them greater efficacy & certainty of effect. In all cases a proper attention should be paid to the state of the prima via. They are generally in a torpid condition, and communicate a similar torpor to the uterus. It may be a proper place here to mention

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that Dr Hamilton in his valuable work on the use of purgative medicines, recommends frequent purging, as the most successful mode of treating this complaint; he generally employs the socotrine aloes, either alone, or in combination with some other drastic resinous purgatives. It has been a long time customary to prescribe the cinchona in this complaint, with a view to its tonic powers, either alone, or combined with other tonics & Calybeates. Whatever may be its powers when prescribed alone, I suspect they would be very much increased by the addition of some other articles, such as the preparations of iron and pure bitter tonics. The following formula seems to be a good combination of those articles

℞ Myrrh: Pulv: ℥ß
Ferri Sulphas. ℈j
Sodae Subcarb: grs XV
Ex: Cinchona ℈j
Syrup: Zingib: q.s. M.f. Mass: et divid: in pilul: XXIV

One of these may be taken four or five times, a day according to circumstances. Gentian, quassia & other bitter tonics are entitled to no small share of confidence in accomplishing

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the first indication of cure, but it is to be recollected, that those possessing an astringent property in any considerable degree, are inapplicable in all cases of retention of the urine. The different preparations of iron are probably more entitled to our confidence than any of the vegitable tonics. Iron has always been considered as very friendly to the human system, and there is perhaps no article of the materia medica, that evinces the effect of a more powerful tonic or leave behind it more durable impressions. To which preparation of this metal I am to give the precedence, I am at a loss to determine. The rubigo ferri or rust of iron, as it is commonly called, seems to be both mild & certain in its operation. It may be given in powder, with a little mucilage or syrup, in doses from six to fifteen grains, to be be repeated pro re nata. It may also be given in form of pills or calybeate wine, the latter form sometimes answers very well in cases of retention, where the stomach is in a very irritable and debilitated condition. The sal martis is a valuable preparation in this complaint, & may be given alone or in combination with the vegitable tonics; a useful formula of which has already been detailed. The tinctura ferri muriatis is the last metallic

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tonic I shall mention in the cure of amenorrhœa; it being decidedly more active than the before mentioned articles, it may be of utility where they have failed to do good. Bathing has always stood prominent among the means of cure in the retention of the catamenia. The cold bath is of doubtful efficacy, it is only to be used when followed by a sense of heat, and comfort, if chillness languor & headache be the consequence of its use, it must be relinquished. The warm bath would in most instances succeed much better. Exercise is not the least important among other remedies; dancing, jumping the rope, and riding on horse back are salutary recreations for a chlorotic patient. She might be much benefited by a resort to some calybeate springs, where the air is pure and the company pleasant, and agreeable. In all cases she should guard against a gloomy despondency, and depression of spirits, and not like Shakespeares unhappy lover;

"Pine in thought,
And with her green, and yellow melancholy:
Sit like Patience on a monument, smiling at grief."

If any dyspeptic symptoms occur they are to be relieved by their appropriate remedies, which need not be mentioned here. In all cases

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the first indication of cure is to be assisted by a nutritive and digestible diet, with a portion of wine. Milk and vegitables should compose the principal part of her aliment, yet it is not necessary to restrict her entirely from animal food. Those remedies now detailed appear to be those most commonly prescribed for the fulfilment of the first indication. I now proceed to the second intention of cure, viz: to awaken the action of the uterine vessels. This is to be effected by exercise, by local stimulating applications, by bathing, by stimulating cathartics, by electricity, and that class of medicines, which are called emmenagogues. That species of exercise which is most proper, has been already mentioned in speaking of the first intention of cure; and not a little is to be confided to its beneficial effects, since it has a tendency to determine the blood into the descending portion of the aorta, and hypogastric arteries, and thereby communicating an excitement to the uterus, and rousing it from its torpid state. To the same end, it has been suggested to compress the iliac arteries, but Dr Bullen confessed that those few trials which he had seen made, were productive of little or no benefit. The use of the warm pediluvium, and semicupium every night on going to bed may be expected to do good in this complaint; the addition of

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common salt renders it more efficacious. The modus operandi of this remedy may be made intelligible on the same principle as that of exercise. I would here ask what would be the effect of rubbing the body all over with fine dry salt. Local stimulants, as vesicating applications to the sacrum, and the inside of the thigh would be of infinite service could they be always applied; but there is always such an invincible antipathy with most females, to such harsh and disagreeable applications, and they are so offensive to female modesty, that we shall find few who are disposed to submit to them. Clothes wrung out of hot water, and applied to the pudenda, would probably be less offensive, and not altogether inert in their effects. The next remedy I shall mention, is venery; this is a local stimulant (if I may so call it) which most authors concur in recomending in this kind of amenorrhea whenever it can be used with propriety. Speaking from my own judgement I can say nothing of this remedy; it is one indeed we should always hesitate to recommend. That it possibly may be useful, I am not allowed to doubt, since it comes from very high authority. But I cannot think it so applicable in the form of amenorrhea now under consideration, as in the suppression of the menses. Of all the remedies in use in this distressing complaint, there are none entitled to a great=

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a share of confidence than some of the resinous purgatives. Aloes, Scammony and Gamboge are those most highly recommended. It has been advised to add Calomel to these purgatives, but Calomel in this disease is to be given, with much caution, and circumspection, and never in Chlorosis unless combined with pulmonary or hepatic affections, is it to be given with a view of producing its specific impressions on the system. The aloes which appear to be the most efficient of the resinous purgatives may be given in combination with gamboge, or the compound aloetic pill may be given. Purgatives act by stimulating the rectum, and communicating their impressions to the uterus, and we should always give the medicine in such doses, and at such intervals as to keep up a steady uniform irritation in the rectum. Electricity passed through the region of the ~~uterus~~ pubis or applied so as to act immediately on the uterus, has been found at times to be productive of much benefit. Every materia medica abounds with a long list of articles which have been emphatically called emmenagogues. But most of these are of doubtful promise, and often do mischief when injudiciously prescribed; they are commonly more applicable in cases of suppression, than retention. The polygala senega has been of late very highly recommended, and is said to be suita-

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the to every form of amenorrhea. It has been employed by several very respectable physicians in Philadelphia, who speak unequivocally of its utility. The cubia hirtorum comes to us, backed by very high testimony in its favour. It is directed to be given in doses of a tea spoonful, entangled in a little mucilage or syrup. These are the general remedies in retention of the menses, but it sometimes happens that chlorosis is combined with phthisis pulmonalis; when this is the case, it will be of service to administer an emetic occasionally. The sulphat of zinc would be proper in such a case. The bowels are to be kept open, and if hectic fever supervene, myrrh combined with the sulphat of iron may be given. If pain in the side may be relieved by a blister, or some warm stimulating plaster. If cough be troublesome, the squill, will serve as a good expectorant, and should be assisted by an opiate at bed time. I now proceed to the consideration of the suppression of the Menses. – –

This I have already observed is divided into prevented and checked menstruation, but as this subdivision leads to no practical utility we shall take no farther notice of it, since their mode of treatment is essentially the same. We shall speak of them both under the more general term of suppression. What is meant by this last term I have

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already explained; but it is to be recollected that every interruption of this flux, after it has once taken place, is not to be considered a case of suppression, for the catamenia is often irregular for some months, and sometimes years, after its first appearance before it becomes regularly, and fully established. Causes. a suppression of the catamenia arises from cold, fear, any powerful passion of the mind, inactivity of the body any of those causes which act violently on the nervous system, and the use of acids and other sedatives. Symptoms connected with the absence of the discharge, are febrile and inflammatory affections, a hard and frequent pulse, pain in the head, back, and loins: the patient suffers from colicky pains, hysteric, and dyspeptic affections, vicarious discharges from the stomach, lungs and other parts of the body. The treatment is in a great many respects, similar to that in chlorosis; at least symptoms here may be relieved the same way as the like symptoms in retention of the menses; this difference however obtains, that in retention, tonics and cold bath are said to be of service, and emmenagogues generally injurious, but the reverse of this happens in suppression of the menses. When there is a hard, and full pulse, with much excitement in the system, venesection is a remedy from which we are to anticipate much

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benefit. Assisted by the warm bath, general or local, the result will be still more beneficial. To increase the relaxing power of these remedies, and to allay pain and irritation, an opiate may be given by mouth or per anum; the latter method would seem preferable in many cases. If suppression of the menses be caused by some chronic disease as consumption or dropsy, an attempt to restore this discharge, more especially by stimulating medecines will seldom fail to do much mischief. The discretion of a physician will here always dictate to him the method to be pursued. In suppression as in all other cases of this complaint, we are to keep our attention directed to the state of the bowels. They are to be kept in a regular condition by the due administration of cathartics: the aloetic pill has unrivalled reputation among other purgative medecines in these cases. If the digestive organs are deranged, tonics and bitters are indicated. As cooperating with the above mentioned medecines, emmenagogues skillfully and judiciously employed demand much of our confidence. I shall not here recitail all the emmenagogues mentioned by different writers on the materia medica, but merely notice some of those of the most approved efficacy. The tincture of guiacum, has acquired the most unreserved confidence of an eminent practitioner of this place. (I allude

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to Dr De Wees) he says, that when given in ~~cases~~ cases of idiopathic suppression and persevered in for a sufficient length of time, he he has never seen it fail to bring on a discharge. The Polygala Senega has of late years been added to the list of emmenagogues. Dr Hartshorne was the first who proclaimed its great powers in amenorrhoea, and its good qualities have since been corroborated, and promulgated by the professor of the practice and institutes of physic ~~in the~~ in the University of Pennsylvania; it is supposed to be singularly useful, when there exists a lining membrane in the uterus. It is recommended to be given in decoction or powder; the decoction is generally preferred. Under its exhibition the system is to be attended to, and too much excitement or debility, is to be obviated by the proper means. The juniperus sabina, and rubia tinctorum have strong testimonies in their favour, and they doubtless have done good in skillful hands. The helleborus niger was introduced into practice by Dr Meade as an emmenagogue, who speaks unequivocally of its ~~discharge~~ efficacy, and subsequent experience with this article, in the hands of other practitioners, confirm much of what he has said of it; it is therefore worthy of a trial.

Many medicines acting diuretically have been extolled in this disease,

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Females are sometimes troubled with a partial interruption of the menses, or a difficult and painful menstruation technically called dysmenorrhœa. This form of the complaint depends upon the formation of a lining membrane in the uterus, which is occasionally expelled with pains greater, than those of child bearing, and is always a source of the greatest inconvenience, and distress to the patient. When there is an increased action in the blood-vessels, venesection is a promising remedy. Warm fomentations to the region of the pubis, blisters to the sacrum, and some other remedies already mentioned, will be found to give relief for a time: it is here that the secale cornutum has been said to display some of its greatest powers. Whether the statements in favour of it, be true, rest on far greater authority than my own. But it here that camphor comes to us supported by the most respectable authority; it is conveniently exhibited in form of the camphorated julep. Opium here, as in phthisis pulmonalis combined with camphor, may be said to be the "magnum Dei

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domum"; the great and bountiful gift of heaven.
It is worthy of remembrance that females disposed to this dis-
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dinate passions, improper diet, and costiveness. Shall conclude the
consideration of the different forms of menstrual derangement,
and their treatment, and shall now only add, that with this
armory of medicine, a due perseverance on our part, a strict ob=
servance of our directions on the part of the female, we may
generally obtain a successful victory over this great enemy
of female health, give our skill its merited triumph, raise
our patient from the languishing bed of sickness, and restore
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